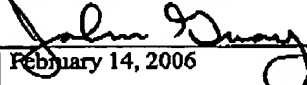


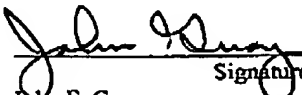
RECEIVED
CENTRAL FAX CENTER

FEB 14 2006

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/504,782
		Filing Date	February 15, 2000
		First Named Inventor	Masahiro KUME et al.
		Group Art Unit	2828
		Examiner Name	Delma R. Flores RUIZ
Total Number of Pages in This Submission	15	Attorney Docket Number	740819-337

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John F. Guay - Reg. No. 47,248 Nixon Peabody LLP 401 9th Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	February 14, 2006

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop _____, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (571) 273-8300.	
February 14, 2006 Date	 John F. Guay Signature Typed or printed name

FEB. 14. 2006 8:22PM

866 741 0075

FEB 14 2006

NO. 5606 P. 2

Docket No. 740819-337

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)	
Masahiro KUME et al.)	Group Art Unit: 2828
Application No. 09/504,782)	Examiner: Delma R. Flores Ruiz
Filed: February 15, 2000)	Confirmation No. 8307
For: SEMICONDUCTOR LASER DEVICE,)	Date: February 14, 2006
OPTICAL DISK APPARATUS AND)	
OPTICAL INTEGRATED UNIT)	

REQUEST FOR RECONSIDERATION

MAIL STOP AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated November 14, 2005, please amend the above-identified application as follows: